WISCONSIN MEDICAID UPDATE

SEPTEMBER 6, 1996

UPDATE 96-31

TO:

Health Departments in Milwaukee
County
Milwaukee County Health and
Social Services
Milwaukee Family Project Advisory
Committee
Prenatal Care Coordination Provider
in Milwaukee County

Milwaukee Child Care Coordination Benefit

New benefit effective July 1, 1996

Provisions of 1995 Wisconsin Act 303 authorize a new Medicaid benefit, Milwaukee Child Care Coordination, effective for dates of service on and after July 1, 1996. The new benefit expands prenatal care coordination services to child care coordination services. Services are available to eligible recipients until the child's seventh birthday.

Child care coordination services help a recipient, and when appropriate, the recipient's family, gain access to, coordinate, assess, and follow-up on necessary medical, social, educational, and other services.

The new benefit is part of the Department of Health and Family Services (DHFS) prevention planning authorized by Wisconsin Act 303. The major provisions of Wisconsin Act 303 are related to the transfer of child protective services from the Milwaukee County Department of Health and Social Services to DHFS.

The DHFS is collaborating with representatives of local Milwaukee organizations to develop an assessment tool and benefit coverage guidelines. Administrative rules will be promulgated in 1997.

Eligible recipients

Providers may only provide child care coordination services to eligible recipients who reside in Milwaukee County.

Services are limited to the following recipients:

- Women who received Medicaid prenatal care coordination services.
- Women who receive a DHFSapproved risk assessment (to determine need) within eight weeks following delivery.

Who may provide services

Medicaid providers who may provide Milwaukee Child Coordination services must meet all of the following:

- Be located in Milwaukee County.
- Be certified as Medicaid prenatal care coordination providers.

Services that are covered

Covered services include the following:

 Risk assessment - procedure code W7095.

- Initial care plan development procedure code W7096.
- Ongoing care coordination and monitoring - procedure code W7097.

We will send you more information on covered services and billing procedures. After the DHFS finalizes the risk assessment tool, we will send you a supply.

Services that are not covered

Under this benefit, Wisconsin Medicaid does not cover diagnosis, treatment or other direct services, including health education and nutrition counseling.

For dates of service prior to the 61st day following delivery for women receiving prenatal care coordination services, Wisconsin Medicaid does not cover procedure codes:

- W7095 (risk assessment).
- W7096 (initial care plan development).
- W7097 (ongoing care coordination and monitoring).

(Bill Medicaid prenatal care coordination services up to sixty days post-partum using these procedure codes.)

You may start providing services immediately

You may bill retroactively for services provided on and after July 1, 1996. Wisconsin Medicaid will reimburse these services if the recipient meets the eligibility requirements on page 1 and the services meet the following conditions:

The provider documents the need for care coordination services. (Providers may use any assessment tool that identifies the need for child care coordination services until the DHFS finalizes a tool.) As part of the documentation, providers must include an assessment which identifies risk factors for adequate family functioning.

Possible risk factors include:

- ✓ The mother had unsubstantiated referrals to child protective services, but other risk factors were identified.
- The new baby has special health care needs and the mother has inadequate support.
- ✓ The mother is a first-time teen parent who needs assistance in coping with the baby and school, understanding the health care delivery system, and developing basic life skills.
- ✓ The family uses violence as a coping strategy.
- ✓ The mother/father is upset about the new baby and/or the sex of the baby which interferes with the ability to parent the child effectively.
- ✓ The mother/father has a disability or condition which interferes with the ability to parent the child effectively.
- ✓ The mother received little or no prenatal care.
- The provider documents the completed care plan based on the recipient's need. The recipient and care coordinator (who developed the care plan) sign the care plan.
- The provider must base the ongoing services, including referral and monitoring, on the care plan. The provider documents the services provided.

Billing information

Use the claim submission guidelines in the Part Z handbook. Follow the general coverage and billing guidelines for prenatal care coordination until further notice. Use the mother's Medicaid ID number for billing.

Some exceptions:

- Use diagnosis codes V61.8 (other specified family circumstances) for recipients who are determined eligible to receive services. Use V61.9 (unspecified family circumstances) for recipients who are assessed but determined not eligible to receive services. Wisconsin Medicaid will deny claims if you use other diagnosis codes.
- Bill procedure code W7095 without a modifier until further notice.
- Use the procedure codes listed in this update only.
- Use procedure codes W7095 and W7096 only when billing on behalf of women who are new to your agency (i.e., for women who did not receive prenatal care coordination services from your agency).
- Use procedure code W7097 when billing for periodic assessment and care plan updates. For example, bill W7097 for updating the care plan of a woman who received prenatal care coordination services from your agency.

Reimbursement

Wisconsin Medicaid reimburses for child care coordination services on a fee-for-service basis, even for recipients enrolled in a Medicaid-contracted HMO (health maintenance organization).

Wisconsin Medicaid requires providers to bill their usual and customary charge. Wisconsin Medicaid reimburses the lesser of the provider's usual and customary fee or the established maximum allowable fee.

Milwaukee Child Care Coordination Maximum Allowable Fees		
Procedure Code	Description	Maximum Allowable Fee
W7095*	Risk Assessment - Child Care Coordination	\$50
W7096	Initial Care Plan Development - Child Care Coordination	\$50
W7097	Ongoing Child Care Coordination and Monitoring	\$40/hour

*The BHCF has not yet determined if procedure code W7095 will require a modifier.

What's new...

Wisconsin Medicaid is in the Department of Health and Family Services (DHFS) formerly known as the Department of Health and Social Services.

If you happen to be out "surfing" the Internet and feel like visiting the DHFS Web site, you can find it at this address:

http://www.dhfs.state.wi.us/

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